# 

QUARTERLY RIEDORT

FEC FORM 3

Office

Use

Only

## REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED -

2022 APR 14 PM 3: 19

FEC FORM 3

(Revised 05/2016)

Office Use Only -

NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number and street)	13,21,9 KJ R1	VDGET PASS	,	
Check if different than previously/reported. (ACC)  2. FEC IDENTIFICATION N	UMBER ▼	Y <b>A</b>		ZIP CODE ▲  STATE ▼ DISTRICT
4. TYPE OF REPORT (Ch. (a) Quarterly Reports:	noose One) (b) 12-Da	ORT. (N) OR  ay PRE-Election Report for the	(A) General (12G)	Runoff (12R)
October 15 Quarterly F  October 15 Quarter  January 31 Year-Er	rly Report (Q3) Elect	tion on Convention (12C)  M M M / D D  To		in the State of Special (30S)
Termination Report	Elect	tion on O.S. D.S.	20,33	in the State of
5. Covering Period   I certify that I have examined the		f my knowledge and belief it is	3/3 ( ) or true, correct and comp	olete.
Type or Print Name of Treasure  Signature of Treasurer  NOTE: Submission of false, erron	Virbici.	A H. WAC	Date Date	3 2023

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## SCHEDULE B (FEC Form 3)

Use separate schedule(s)

OR LINE NUMBER:				L	PAGE		OF_	
heck	only	y one)				-		
		17		18		19a		196
		20a		20b		20c		21

ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	17 18 19a 19b 20a 20b 20c 21
Any information copied from such Reports and Statement or for commercial purposes, other than using the name a		
NAME OF COMMITTEE (in Full)		
PAJL WALKER BO	R CONGRESS	
A.		
State		FEC Identification Number
Purpose of Disbursement  PURCHACK CAROK SCORE	19:165802	C00790345
Candidate Name	Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursement Senate	For:	
State: District: Other	er (specify) ▼	Memo Item
	PRAPER	Date of Disbursement
Mailing Address	1636 ST MD 30	03/26/2022
SARCOXIA M Purpose of Disbursement	6.64862	FEC Identification Number
PUBLIC RELATIONS	·	C 06 T 90.5 45  /Amount of Each Disbursement this Period
PAUL WALKES Office Sought:   X House   Disbursement	Category/ Type	\$ 1495,00
Senate President Othe	nary [	Memo Item
Full Name (Last, First, Middle Initial)		<del></del>
c		Date of Disbursement
Mailing Address		
City	Zip Code	FEC Identification Number
Purpose of Disbursement		C ;
Candidate Name	Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursement Senate Prim President Othe	( ")	, , , ,
State: District:	(	Memo Item
SÙBTOTAL of Disbursements This Page (optional)		· F 1895.00
TOTAL This Period (last page this line number only)		•

## NONN DE LES DE DOCUMENT

PAGE / FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 19a 19b **Detailed Summary Page** 20a 20b 20c Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) 11 HACKER FOR CONGRESS

e (Last, First, Middle Initial) Date of Disbursement UNTRELL BARNES State **FEC Identification Number** C00790345 Candidate Name Amount of Each Disbursement this Period Category/ 3,000.00 Office Sought: Disbursement For: Primary General Senate President Other (specify) Memo Item District: State: Full Name (Last, First, Middle Initial) Date of Disbursement **FEC Identification Number** Amount of Each Dig ersement this Period Category/ Type House Disbursement For: Primary General Senate Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement 00 Zip Code State **FEC Identification Number** Purpose of Disbursement C00790346 Candidate Name Amount of Each Disbursement this Period Category/ Type House Disbursement For: Office Sought: Primary General Senate Other (specify) President Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only).....

## ARTERLY REPORT

SCHEDULE A	(FEC Form 3	;)		
ITEMIZED RECEIPTS				

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports ar	nd Statements m	ay not be sold or used by a	ny person for the purpose of soliciting contributions
r for commercial purposes, other than using	the name and a	address of any political comm	nittee to solicit contributions from such committee.
PADL WALK	EU R	er Conigr	4255
Full Name (Last, First, Middle Initial)  Mailing Address	D.		Date of Receipt
32,9 W, RIVUR	State State	Zip Code	01 18 2022
FEC ID number of contributing	0.5	65810	Amount of Each Passint this Pasied
federal political committee.		790345	Amount of Each Receipt this Period
Name of Employer  STUF  Receipt For:		THOR vole-to-Date	Memo Item
Primary General Other (specify) ▼	Election Cy	, ,	
		<u>'</u>	
Full Name (Last, First, Middle Initial)  WACKER TOO  Mailing Address	<u> ز د</u>		D s.f. si
3219 W. RIVOLE	State N	Zip Code	11 13 11 12
SPRINGEIELD,	140.	66810	
FEC ID number of contributing federal political committee.	COZ	790345	Amount of Each Receipt this Period
Name of Employer	Occupation A J 7	HORE	, 6
Receipt For:  Primary General  Other (specify) ▼	Election Cy	ccle-to-Date	Memo Item!
Full Name (Last, First, Middle Initial)			
Mailing Address		<del></del>	Date of Receipt
City	State	Zip Code	
FEC ID number of contributing federal political committee.	С	<del>-                                    </del>	Amount of Each Receipt this Period
Name of Employer	Occupation		· , ,
Receipt For:   Primary   General	Election Cy	cle-to-Date	Memo Item
Other (specify) ▼		; ,	14
SUBTOTAL of Receipts This Page (optional)			13,200.00
NOTAL This Period (last page this line mumb	er only		

### **DETAILED SUMMARY PAGE**

of Receipts

PAGE 3/4

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

## Paul walker for Congress

Report Covering the Period:

From:





To:







I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	0.00	0.000
	(ii) Unitemized	0.00	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
	(iii) TOTAL of contributions from individuals	, ,2000.00	0.00
	(b) Political Party Committees	0.00	
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate	1320000	0.00
	(e) TOTAL CONTRIBUTIONS - (other than loans)		
	(add Lines 11(a)(iii), (b), (c), and (d))	, 13,400,00	1.4.6,4.00,000
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	, <u>,</u> ,,,,	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
13.	LOANS:		
	(a) Made or Guaranteed by the Candidate	,	
	(b) All Other Loans		, , , , , , , , , , , , , , , , , , ,
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	
14.	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	<u>,</u> , , , , , , , , , , , , , , , , , ,	,,
15.	OTHER RECEIPTS (Dividends, Interest, etc.)	,	<u></u>
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	13,400.00	145,400,000

### **DETAILED SUMMARY PAGE**

of Disbursements

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PAGE 4 / 4

**COLUMN A COLUMN B** II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate..... (b) Of All Other Loans ..... (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees ..... (b) Political Party Committees..... Other Political Committees (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... 0.00 21. OTHER DISBURSEMENTS ..... 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 25. SUBTOTAL (add Line 23 and Line 24)..... 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....

2022 APR IL PM 3: PBESS FIRMLY TO SEAL

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Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
Next Busin	ness Day Delivery			
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Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
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